

REQUEST FOR QUALIFICATIONS

The Town of Darien is seeking a highly qualified Health Insurance Broker to perform a cost-benefit analysis of combining the Health Care benefits for the Darien Board of Education and Town of Darien.

Procurement contact:

REQUEST FOR QUALIFICATIONS

The Town of Darien (hereinafter referred to as “The Town”) and Darien Board of Education (hereinafter referred to as “the Board”) is seeking written proposals for Insurance Brokerage Services to conduct a cost-benefit analysis and review of the positive and negative aspects of combining group health and dental insurance for both the Town and the Board.

The Town and Board are jointly seeking written proposals for a consultant to review any economies of scale and any other cost savings associated with combining the groups, while retaining existing benefit design, as well as the potential savings of moving both groups from fully insured to any alternately funded option.

BACKGROUND

The Town’s current health insurance carrier is ConnectiCare. The Town’s enrollment is comprised of 124 active members and 14 retirees. Delta Dental is the Town’s dental insurance carrier. There are currently 194 individuals covered. Benefits may be subject to collective bargaining agreements (CBAs). The Town’s benefits run on a fiscal year basis (July 1 to June 30). The plans are all fully insured. As of July 1, 2016, the Town will only offer a High Deductible Health Plan (HDHP) with a Health Savings Account (HSA), or, where applicable, a Health Reimbursement Account (HRA). The Town currently provides a seed to employee’s HSA accounts, and a like amount of funding for HRA accounts. Prescription drug coverage is integrated with the medical plan.

ConnectiCare is also the Board’s health insurance carrier. The Board’s current enrollment is made up of 610 members; 587 active employees and 23 retirees. All benefits are negotiated and implemented via Collective Bargaining Agreements (CBAs).

The Board’s benefits run on a plan year basis (July 1 to June 30). The majority of the plans in place are fully insured High Deductible Health Plans (HDHP) with a Health Savings Account (HSA). People’s United Bank is the bank of choice for all HSAs. The Board contributes a percentage of the plan deductible, as outlined in CBAs. Members that do not qualify for a HSA are enrolled in a Health Reimbursement Arrangement (HRA) administered by Health Equity. Prescription drug benefits are built into all plans.

A POS plan is offered as an alternative option, with a buy-up, for the Administrators as well as the Custodians and Maintenance groups. The Custodian and Maintenance groups are currently in negotiations; therefore, the option to participate in a POS plan may change in the future.

The consultant will report to a management group consisting of representative from the Town, BOE and representative volunteer boards.

**** The RFQ is not a request for brokerage services. Both parties currently have a broker assigned to perform that function.**

REQUESTED SERVICES:

1. Provide a feasibility study including weighing the positive and negative and all projected impacts of implementing a joint venture between Town and Board on combining the following plans:
 - a. Health Insurance (currently Fully-Insured)
 - b. Dental Insurance (currently Self-Insured)
2. Identify and compare possible funding arrangements and their implications for the Town and Board in regard to costs and future trends.

CRITERIA FOR EVALUATION OF PROPOSAL

Among the criteria (not listed in priority order) to be used for evaluation of submitted proposals are:

1. The Consultant's ability to demonstrate familiarity with the local health insurance industry, regulations, laws, practices and trends as they relate to public-sector group employee plans;
2. The Consultant's ability to demonstrate such analysis.
3. The Consultant's experience with municipal governments and collectively bargained health plans;
4. Price; cost for providing the analysis.
5. Ability to complete the contract within the specified time frame.
6. Other factors as may be considered appropriate by the Town.

PROPOSAL RESPONSE FORMAT

It is very important that all Proposals follow the same format. Respondents must adhere to the structure outline shown below. Please use a tab in your Proposal for each of the following (there should be six (6) tabs):

1) Financial Proposal Information:

It is expected that the consultant will provide all services described in the “Requested Services” of this RFQ. The proposed fees for this analysis must include all costs including miscellaneous administrative expenses, travel, etc.

Fee should be provided in a lump sum amount for assignment.

2) Detailed Scope of Services:

Provide your proposed scope of work and detailed project timeline.

3) Experience and Capability of the Individuals Assigned to this Project:

a. Principal Consultant(s)

Name the Principal Consultant(s)/Account Executive(s) who will provide consulting services to the Town under this contract. For each individual, provide the following information:

- I. Description of consulting experience;
- II. Education;
- III. Length of employment with the firm;
- IV. Length of employment as a broker/consultant;
- V. Professional credentials and affiliations;
- VI. Description of prior employment;
- VII. List principal areas of strength;
- VIII. Anticipated percent of time or number of hours this individual will devote to the Town account;
- IX. List the three largest clients (of any type) served by the principal consultant, and
- X. List the three (3) largest municipalities served by the principal consultant.

b. Knowledge of Insurance Law:

Explain knowledge of and compliance with new and existing Federal and State of Connecticut laws affecting insurance programs and services expected from the consultant. Explain the process your company utilizes to provide legal analysis and review of such laws. Provide the background and experience of the individual or individuals in your company who will be responsible for analyzing and interpreting applicable laws with respect to Town insurance programs.

4) Experience:

Explain background/history of your company and describe experience in providing this specific type of analysis. Explain level of experience and at least three (3) references for engagements with clients, including experience with clients in other municipalities. Please include contact information for all references.

5) Provide corporate summary:

Name of Company:

Contact Name & Title:

Street Address:

City, State, ZIP:

Telephone:

Email:

Fax:

Federal Tax Id #:

Company URL, if available:

- 6) Describe your specific experiences in cost containment/reduction strategies for health benefit programs with small to mid-size municipal organizations and bargaining units.

OWNERSHIP OF SUBMISSIONS:

Upon submission, all responses become the property of the Town. The Town reserves the right to use the information and any ideas presented in any submission in response to the RFQ, whether or not the submission is accepted.

CANCELLATION OR AMENDMENT OF RFQ:

The Town reserves the right to cancel or amend this RFQ at any time and will notify all known RFQ recipients accordingly.

AWARD:

This Proposal may be awarded to more than one firm if it is in the best interest of the Town to do so.

SUBMISSION DEADLINE:

Proposals submitted to the Town shall address all services required of the provider as well as all criteria for evaluation of the proposal. Proposals must also include a summary of the provider's liability insurance.

One original and seven (7) copies of proposals must be received by the Town no later than 3:00 p.m. on June 17, 2016. Proposals received after the deadline will not be eligible for consideration. The Town cannot be responsible for any proposals or materials that are mailed and not received by the deadline.

CONTACT:

Questions should be directed to:
Kathleen Buch, Town Administrator
kbuch@darienct.gov